01/18/2011 13:38

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Than A	An Authorized Commit	tee	Office Use Only
NAME OF COMMITTEE (in full)	USE FEC MAILING I OR TYPE OR PRINT		g, type	
Skilled Healthcare Group	Inc. Political Action Comm	nittee		
ADDRESS (number and street)	27442 Portola Parl	kway Suite 200		
Check if different than previously reported. (ACC)	Foothill Ranch		CA	92610
2. FEC IDENTIFICATION N	IUMBER ▼	CITY 🛕	STATE	ZIPCODE 🛦
C00442426		3. IS THIS X	NEW (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Repo July 15 Quarterly Repo October 15 Quarterly Repo X January 31 Quarterly Repo July 31 Mid-Yea Report(Non-ele Year Only) (MY Termination Re (TER)	rt(Q2) (c) 12-Day PRE-Ele Report for rt(Q3) rt(YE) ar ction) (d) 30-Day Post -E Report for	Election on General (30	(12C) Sp	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Peneral (12G) In the State of Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) Special (30S) in the State of
5. Covering Period	11 23 20	0 1 0 through	12 31	2010
orgination of Frontiers	rer Jon Sadayasu ctronically Filed by Jon S	Sadayasu	Date	01 18 2011
NOTE : Submission of false, e	erroneous, or incomplete in	ntormation may subject the per	son signing this Report	FEC FORM 3X (Rev. 12/2004)

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/34

Write or Type Committee Name Skilled Healthcare Group Inc. Political Action Committee

FEC Form 3X (Rev. 02/2003)

D D " D 11 23 2010 12 31 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 58279.42 January 1 (b) Cash on Hand at 76903.90 Begining of Reporting Period 14812.33 41962.81 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 91716.23 100242.23 6(a) and 6(c) for Column B) 2000.00 10526.00 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 89716.23 89716.23 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 34

Write or Type Committee Name

Skilled Healthcare Group Inc. Political Action Committee

Report Covering the Period:

From:

^D 2 3

To:

м м 12 D D 31

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	14159.38	31246.66
	(ii) Unitemized	652.95	10616.15
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	14812.33	41862.81
(b) Political Party Committees	0.00	0.00
`	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	14812.33	41862.81
	Fransfers From Affiliated/Other Party Committees	0.00	0.00
3. <i>A</i>	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	o Federal candidates and Other Political Committees	0.00	100.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
8. 1	Transfers from Non-Federal and Levin Funds		
((a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	14812.33	41962.81
	otal Federal Receipts subtract Line 18(c) from Line 19)	14812.33	41962.81

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4/34

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: — (a) Shared Federal/Non-Federal —		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Transfers to Affiliated/Other Party Committees	0.00	0.00
	Contributions to		
	Federal Candidates/Committeesand Other Political CommitteesIndependent Expenditure	0.00	500.00
	(use Schedule E)	0.00	0.00
	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	(use Schedule F)		
	Loan Repayments Made	0.00	0.00
,	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
).	Other Disbursements	2000.00	10026.00
).	Federal Election Activity (2 U.S.C 431(20))		
-	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2000.00	10526.00
	T. 15 1 1511		
2.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 34

III. Net Contributions/Opera Expenditures	ting COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans from Line 11(d), page 3)	·	41862.81
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	14010.00	41862.81
 Total Federal Operating Expenditure (add Line 21(a)(i) and Line 21(b)) 	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 34 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>/</u> 4.	Full Name (Last, First, Middle Initial) Kelly Atkins		······································	Date of Receipt
	Mailing Address 27442 Portola Pkwy #2 City	200 State	Zip Code	1 2 0 3 2 0 1 0 Transaction ID: A2010-3377135
	Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 36.00
	Name of Employer Skilled Healthcare LLC Receipt For: Primary General	Occupation Area Pre		
_	Other (specify) ▼ Full Name (Last, First, Middle Initial)		864.00	
3.	Kelly Atkins Mailing Address 27442 Portola Pkwy #2	Date of Receipt 1 2		
	City State		Zip Code	Transaction ID: A2010-3377480
	Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 36.00
	Name of Employer Skilled Healthcare LLC	Occupation Area Pre		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 900.00	
-).	Full Name (Last, First, Middle Initial) Kelly Atkins			Date of Receipt
	Mailing Address 27442 Portola Pkwy #2	200		12 31 YYYY 12 31 2010
	City	State	Zip Code	Transaction ID: A2010-3377392
	Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 36.00
	Name of Employer Skilled Healthcare LLC	Occupation Area Pre		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 936.00	
	SUBTOTAL of Receipts This Page (optional)			108.00
	TOTAL This Period (last page this line number	only)		

A. Form/Schedule : SA11AI

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politic	d Statements may not be sold or used by any per the name and address of any political committee	rson for the purpose of soliciting contributions
y Granda Floatinoard Group inc. Fortic	at Action Committee	
Full Name (Last, First, Middle Initial) Carrie Benefield Mailing Address 27442 Portola Pkwy	4000	Date of Receipt
Mailing Address 27442 Portola Pkwy	#200	11 26 2010
City	State Zip Code	Transaction ID: A2010-3282718
Foothill Ranch	CA 92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Skilled Healthcare LLC	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	850.00	
Full Name (Last, First, Middle Initial) Carrie Benefield		Date of Receipt
Mailing Address 27442 Portola Pkwy	#200	12 10 2010
City	State Zip Code	Transaction ID: A2010-3377235
Foothill Ranch	CA 92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Skilled Healthcare LLC	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial) Carrie Benefield		Date of Receipt
Mailing Address 27442 Portola Pkwy	#200	12 24 2010
City	State Zip Code	Transaction ID: A2010-3377364
Foothill Ranch	CA 92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Skilled Healthcare LLC	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	_1
Primary General Other (specify) ▼	950.00	
-)	150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/34 (check only one)		
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Polit	ical Action Com	mittee			
Full Name (Last, First, Middle Initial) Michael Boxer			Date of Receipt		
Mailing Address 29 Ball Mill Place					
City	State	Zip Code	1 2 2 0 2 0 1 0 Transaction ID: A2010-3362912		
Atlanta FEC ID number of contributing federal political committee.	GA C	30350	Amount of Each Receipt this Period 2500.00		
Name of Employer Skilled Healthcare LLC	Occupatio Director	n			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00			
Full Name (Last, First, Middle Initial) William A Crommett			Date of Receipt		
Mailing Address 27442 Portola Pkw	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-3377132 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	02010	40.00		
Name of Employer Skilled Healthcare LLC	Occupatio CIOSVP				
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 960.00			
Full Name (Last, First, Middle Initial) William A Crommett			Date of Receipt		
Mailing Address 27442 Portola Pkw	y #200		1 2 1 7 2 0 1 0		
City	State	Zip Code	Transaction ID: A2010-3377477		
Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 40.00		
Name of Employer Skilled Healthcare LLC	Occupatio CIOSVP				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00			
SUBTOTAL of Receipts This Page (options	al)		2580.00		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 34 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may g the name and add	not be sold or used by any persidress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
Skilled Healthcare Group Inc. Polit	tical Action Com	mittee	
Full Name (Last, First, Middle Initial) William A Crommett Mailing Address 27442 Portola Pkw	yy #200		Date of Receipt
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-3377389 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Skilled Healthcare LLC	Occupation CIOSVP	IT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1040.00	
Full Name (Last, First, Middle Initial) Huong Dang	I		Date of Receipt
Mailing Address 2909 West Willits	12 03 2010		
City	State	Zip Code	Transaction ID: A2010-3377143
Santa Ana FEC ID number of contributing federal political committee.	CA	92704	Amount of Each Receipt this Period 30.00
Name of Employer Skilled Healthcare LLC	Occupation VP Intern		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00	
Full Name (Last, First, Middle Initial) Huong Dang Mailing Address 2909 West Willits	1		Date of Receipt
City	State	Zip Code	1 2 1 7 2 0 1 0 Transaction ID: A2010-3377488
Santa Ana	CA	92704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Skilled Healthcare LLC	Occupation VP Intern	al Audit	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option	al)		100.00
TOTAL This Period (last page this line nun	nber only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political	e name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Huong Dang Mailing Address 2909 West Willits City Santa Ana FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	State Zip Code CA 92704 C Occupation VP Internal Audit Aggregate Year-to-Date 780.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Kelly Delk Mailing Address 27442 Portola Pkwy # City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	State Zip Code CA 92610 C Occupation Area President Aggregate Year-to-Date 600.00	Date of Receipt M M D D 2 0 1 0
Full Name (Last, First, Middle Initial) Kelly Delk Mailing Address 27442 Portola Pkwy # City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	State Zip Code CA 92610 C Occupation Area President Aggregate Year-to-Date 625.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		80.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 34 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Kelly Delk Mailing Address 27442 Portola Pkwy #2 City	State	Zip Code	Date of Receipt M
	Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 25.00
	Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupatio Area Pre Aggregate		
_ 3.	Full Name (Last, First, Middle Initial) Robert Fancy Mailing Address 27442 Portola Parkway	y		Date of Receipt 1 2 0 3 2 0 1 0
	City Foothill Rnach	State CA	Zip Code 96210	Transaction ID: A2010-3377148 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC	Occupatio	n Management	25.00
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	
- ;.	Full Name (Last, First, Middle Initial) Robert Fancy Mailing Address 27442 Portola Parkway	y		Date of Receipt 1 2 1 7 2 0 1 0
	City Foothill Rnach	State CA	Zip Code 96210	Transaction ID: A2010-3377493 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Skilled Healthcare LLC	Occupatio VP Risk	n Management	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)			75.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Skilled Healthcare Group Inc. Politica	I Action Com	nmittee	
Α.	Full Name (Last, First, Middle Initial) Robert Fancy Mailing Address 27442 Portola Parkwa			Date of Receipt
	Mailing Address 27442 Portola Parkwa	ay ————————————————————————————————————		12 31 2010
	City Foothill Rnach	State CA	Zip Code	Transaction ID: A2010-3377405
	FEC ID number of contributing federal political committee.	C	96210	Amount of Each Receipt this Period 25.00
	Name of Employer Skilled Healthcare LLC	Occupatio VP Risk	n Management	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) Christopher Felfe Mailing Address 27442 Portola Pkwy #	+200		Date of Receipt
		12 03 2010		
	City Foothill Ranch	State CA	Zip Code	Transaction ID: A2010-3377139
	FEC ID number of contributing federal political committee.	C	92610	Amount of Each Receipt this Period 25.00
	Name of Employer Skilled Healthcare LLC	Occupatio CAO	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
C.	Full Name (Last, First, Middle Initial) Christopher Felfe			Date of Receipt
•	Mailing Address 27442 Portola Pkwy #	200		12 17 2010
	City	State	Zip Code	Transaction ID: A2010-3377484
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Skilled Healthcare LLC	Occupatio CAO	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 625.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politics	nd Statements may not be sold or used by any pers g the name and address of any political committee to tical Action Committee	
Full Name (Last, First, Middle Initial) Christopher Felfe Mailing Address 27442 Portola Pkw City Foothill Ranch FEC ID number of contributing	y #200 State Zip Code CA 92610 C	Date of Receipt 1 2 3 1 2 0 1 0 Transaction ID: A2010-3377396 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify) General	Occupation CAO Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Denise German Mailing Address 27442 Portola Pkw		Date of Receipt 1 2
City <u>Foothill Ranch</u>	State Zip Code CA 92610	Transaction ID: A2010-3377136 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Skilled Healthcare LLC	Occupation VPO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	
Full Name (Last, First, Middle Initial)		Data of Descipt
Denise German Mailing Address 27442 Portola Pkw	y #200	Date of Receipt 1 2 1 7 2 0 1 0
City	State Zip Code	Transaction ID: A2010-3377481
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC	Occupation VPO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)	65.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15/34 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politica	al Action Com	nmittee	
Α.	Full Name (Last, First, Middle Initial) Denise German			Date of Receipt
	Mailing Address 27442 Portola Pkwy	#200		12 31 2010
	City	State	Zip Code	Transaction ID: A2010-3377393
	Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 20.00
	Name of Employer Skilled Healthcare LLC	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00	
Б.	Full Name (Last, First, Middle Initial) Devasis Ghose Mailing Address 36 Vernon			Date of Receipt
	Mailing Address 36 Vernon			12 10 2010
	City	State	Zip Code	Transaction ID: A2010-3296407
	Newport Coast FEC ID number of contributing federal political committee.	CA	92657	Amount of Each Receipt this Period 1500.00
	Name of Employer Skilled Healthcare LLC	Occupation Executiv		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1500.00	
с. С.	Full Name (Last, First, Middle Initial) Jeanette Haskins			Date of Receipt
	Mailing Address 27442 Portola Pkwy	#200		1 2 0 3 2 0 1 0
	City	State	Zip Code	Transaction ID: A2010-3377209
	Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 15.00
	Name of Employer Skilled Healthcare LLC	Occupation Director	of Human Resources	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	
	SUBTOTAL of Receipts This Page (optional)			1535.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (F	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 34 (check only one) X 11a
or for commercial purpose NAME OF COMMITTE	es, other than using the name and EE (In Full)	address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Skilled Healthcare	Group Inc. Political Action C	ommittee	
Full Name (Last, First, Jeanette Haskins	·		Date of Receipt
Mailing Address 274	142 Portola Pkwy #200		12 17 2010
City	State	'	Transaction ID: A2010-3377554
Foothill Ranch FEC ID number of cor		92610	Amount of Each Receipt this Period
federal political commi	ttee.		10.00
Name of Employer Skilled Healthcare LLC	Occupa Direct	ation or of Human Resources	
Receipt For:		gate Year-to-Date ▼	
Other (specify)	General 7	240.00	
Full Name (Last, First, Jeanette Haskins	Middle Initial)		Date of Receipt
Mailing Address 274	142 Portola Pkwy #200		12 31 2010
City	State	Zip Code	Transaction ID: A2010-3377464
Foothill Ranch	CA	92610	Amount of Each Receipt this Period
FEC ID number of cor federal political commi			15.00
Name of Employer Skilled Healthcare LLC	Occupa Direct	ation or of Human Resources	
Receipt For:		gate Year-to-Date	
Primary Other (specify)	General 7	255.00	
Full Name (Last, First, Boyd W Hendrickson	Middle Initial)		Date of Receipt
	142 Portola Pkwy #200		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City	State	Zip Code	Transaction ID: A2010-3377131
Foothill Ranch	CA	92610	Amount of Each Receipt this Period
FEC ID number of cor federal political commi			200.00
Name of Employer Skilled Healthcare LLC	Occupa CEO	ation	
Receipt For: Primary Other (specify)	General Aggrec	ate Year-to-Date ▼ 4800.00	
SUBTOTAL of Receipts	This Page (optional)		230.00
	page this line number only)	·	

A.

В.

C.

		FOR LINE NUMBER: PAGE 17/34				
SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS	for each category of the	X 11a 11b 11c 12				
	Detailed Summary Page	13 14 15 16 17				
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used by any person and address of any political committee to	n for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)						
Skilled Healthcare Group Inc. Political Action	on Committee					
Full Name (Last, First, Middle Initial) Boyd W Hendrickson	d W Hendrickson					
Mailing Address 27442 Portola Pkwy #200		12 17 2010				
City	State Zip Code	Transaction ID: A2010-3377476				
Foothill Ranch	CA 92610	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		200.00				
Skilled Healtheare LLC	•	1				
Receipt For: Primary General Other (specify) ▼	ggregate Year-to-Date ▼ 5000.00					
Full Name (Last, First, Middle Initial) John Ikerd		Date of Receipt				
Mailing Address 27442 Portola Parkway		1 2 1 7 2 0 1 0 Transaction ID: A2010-3377496				
City	State Zip Code					
Foothill Ranch	CA 96210	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		10.00				
Skilled Healthcáre I.I.C.	•	1				
Receipt For:	ggregate Year-to-Date ▼					
Primary General	210.00					
Other (specify) ▼	210.00					
Full Name (Last, First, Middle Initial) John Ikerd		Date of Receipt				
Mailing Address 27442 Portola Parkway		1 2 3 1 2 0 1 0				
City	Date of Receipt State Zip Code CA 92610					
Foothill Ranch	CA 96210					
FEC ID number of contributing federal political committee.		10.00				
Skilled Healthcáre I.I.C	·					
Receipt For: Primary General Other (specify) ▼						
SUBTOTAL of Receipts This Page (optional)	>	220.00				

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 34 (check only one) X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant be name and address of any political committee to	
Skilled Healthcare Group Inc. Politic Full Name (Last, First, Middle Initial)	cal Action Committee	
Michele J Kaufman Mailing Address 24325 Armada Drive		Date of Receipt
City	State Zip Code	1 2 0 3 2 0 1 0 Transaction ID: A2010-3377142
Dana Point	CA 92629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Skilled Healthcare LLC	Occupation Director Executive Services	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Michele J Kaufman		Date of Receipt
Mailing Address 24325 Armada Drive	9	1 2 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: A2010-3377487
Dana Point	CA 92629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Skilled Healthcare LLC	Occupation Director Executive Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00]
Full Name (Last, First, Middle Initial) Michele J Kaufman		Date of Receipt
Mailing Address 24325 Armada Drive)	12 31 Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: A2010-3377399
Dana Point	CA 92629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Skilled Healthcare LLC	Occupation Director Executive Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
SURTOTAL of Receipts This Page (antional)	30.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 34 (check only one) X
Any information copied from such Reports or for commercial purposes, other than use NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Po	s and Statements may not be sold or used by any personing the name and address of any political committee to political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lorraine Kozloski Mailing Address 534 Via Estrada City Laguna Woods FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For:	Unit A State Zip Code CA 92637 C Occupation Accountant Aggregate Year-to-Date	Date of Receipt 1 2 0 3 2 0 1 0 Transaction ID: A2010-3377141 Amount of Each Receipt this Period 20.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Lorraine Kozloski	480.00	Date of Receipt
City Laguna Woods FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General	State Zip Code CA 92637 C Occupation Accountant Aggregate Year-to-Date	Transaction ID: A2010-3377486 Amount of Each Receipt this Period 20.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Lorraine Kozloski Mailing Address 534 Via Estrada		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Laguna Woods</u> FEC ID number of contributing federal political committee.	State Zip Code CA 92637	Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation Accountant Aggregate Year-to-Date 520.00]
SUBTOTAL of Receipts This Page (opti	onal)	60.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 34 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Skilled Healthcare Group Inc. Politica	l Action Com	nmittee	
Α.	Full Name (Last, First, Middle Initial) Zachary Larson			Date of Receipt
	Mailing Address 27442 Portola Parkwa			12 03 2010
	City <u>Foothill Ranch</u>	State CA	Zip Code 96210	Transaction ID: A2010-3377149 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Skilled Healthcare LLC	Occupation Associate	on te Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Zachary Larson Mailing Address 27442 Portola Parkwa	av		Date of Receipt
			7: 0 !	12 17 2010
	City Foothill Ranch	State CA	Zip Code 96210	Transaction ID: A2010-3377494 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer Skilled Healthcare LLC	Occupation Associate	on te Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
с. С.	Full Name (Last, First, Middle Initial) Zachary Larson			Date of Receipt
	Mailing Address 27442 Portola Parkwa	ay		12 31 YYYY 2010
	City Foothill Ranch	State CA	Zip Code 96210	Transaction ID: A2010-3377406
	FEC ID number of contributing federal political committee.	C	30210	Amount of Each Receipt this Period 25.00
	Name of Employer Skilled Healthcare LLC	Occupation Associate	on te Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00
Ì	TOTAL This Period (last page this line numbe	r onlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 34 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political	he name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Frederic Maas Mailing Address 27442 Portola Pkwy City Foothill Ranch	#200 State CA	Zip Code 92610	Date of Receipt 1 2 0 3 2 2 0 1 0 Transaction ID: A2010-3377137 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼		n ector of Tax e Year-to-Date ▼	38.46
Full Name (Last, First, Middle Initial) Frederic Maas Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary Other (specify)	State CA C Occupation SVP Direction	Zip Code 92610 n ector of Tax e Year-to-Date ▼ 961.50	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Frederic Maas Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	State CA C Occupation SVP Direct	Zip Code 92610 n ector of Tax e Year-to-Date ▼ 999.96	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		•	115.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 34 (check only one) X
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	
Skilled Healthcare Group Inc. Politi	ical Action Committee	
Full Name (Last, First, Middle Initial) Richard Mainville		Date of Receipt
Mailing Address PO Box 248		12 03 2010
City <u>Silverado</u>	State Zip Code CA 92676	Transaction ID: A2010-3377144 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Skilled Healthcare LLC	Occupation Cash Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Richard Mainville	I	Date of Receipt
Mailing Address PO Box 248	M M / D D / Y Y Y Y Y 1 1 2 0 1 0	
City	State Zip Code	Transaction ID: A2010-3377489
Silverado FEC ID number of contributing federal political committee.	CA 92676	Amount of Each Receipt this Period 10.00
Name of Employer Skilled Healthcare LLC	Occupation Cash Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Richard Mainville		Date of Receipt
Mailing Address PO Box 248		1 2 3 1 2 0 1 0
City Silverado	State Zip Code CA 92676	Transaction ID: A2010-3377401 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Skilled Healthcare LLC	Occupation Cash Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional	ıl)	30.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 34 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Poli	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jimmy Melton Mailing Address 27442 Portola Pkv	nn, #200		Date of Receipt
City Foothill Ranch FEC ID number of contributing	State CA	Zip Code 92610	1 2 0 3 2 0 1 0 Transaction ID: A2010-3377199 Amount of Each Receipt this Period 20.00
federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	1	n e Director e Year-to-Date ▼	20.00
Full Name (Last, First, Middle Initial) Jimmy Melton Mailing Address 27442 Portola Pkv	vy #200		Date of Receipt M
City	State	Zip Code	Transaction ID: A2010-3377544
Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC		e Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00]
Full Name (Last, First, Middle Initial) Jimmy Melton			Date of Receipt
Mailing Address 27442 Portola Pkv	vy #200		12 31 2010
City Footbill Danah	State CA	Zip Code	Transaction ID: A2010-3377454
Foothill Ranch FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC		e Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00]
SUBTOTAL of Receipts This Page (option	nal)		60.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politica	e name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Donna Miller Mailing Address 1501 S. Beach Blvd # City La Habra FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC	State CA C Occupation Director	Zip Code 90631 n Hospice	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date ▼ 240.00	
Donna Miller Mailing Address 1501 S. Beach Blvd #		7:a Coda	Date of Receipt 1 2 1 0 2 0 1 0
City La Habra	State CA	Zip Code 90631	Transaction ID: A2010-3377224
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 10.00
Name of Employer Skilled Healthcare LLC	Occupation Director		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Donna Miller			Date of Receipt
Mailing Address 1501 S. Beach Blvd #	K-1007		1 2 2 4 2 0 1 0
City	State	Zip Code	Transaction ID: A2010-3377353
La Habra	CA	90631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Skilled Healthcare LLC	Occupation Director		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional) .			30.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for eac	eparate schedule(s) th category of the ad Summary Page	FOR LINE NUMBER: PAGE 25 / 34 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Polit	g the name and address of an	old or used by any person ny political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Roland Rapp Mailing Address 27442 Portola Pkw	v #200		Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip C CA 9261		Transaction ID: A2010-3377133 Amount of Each Receipt this Period 192.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	Occupation General Counsel/ Aggregate Year-to-D		
Full Name (Last, First, Middle Initial) Roland Rapp Mailing Address 27442 Portola Pkw	y #200		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Foothill Ranch	State Zip C		Transaction ID: A2010-3377478 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.00
Name of Employer Skilled Healthcare LLC	Occupation General Counsel/	CAO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	Pate ▼ 4608.00	
Full Name (Last, First, Middle Initial) Roland Rapp			Date of Receipt
Mailing Address 27442 Portola Pkw	y #200		12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Foothill Ranch	State Zip C CA 9261		Transaction ID: A2010-3377390 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.00
Name of Employer Skilled Healthcare LLC	Occupation General Counsel/	CAO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	Pate ▼ 4800.00	
SUBTOTAL of Receipts This Page (option	al)		576.00

ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26/34 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politi	cal Action Com	mittee	
Full Name (Last, First, Middle Initial) Scott C Robinson			Date of Receipt
Mailing Address 717 W. Balboa Blvo	d.		11 26 2010
City	State	Zip Code	Transaction ID: A2010-3282708
Balboa FEC ID number of contributing federal political committee.	CA	92661	Amount of Each Receipt this Period 15.00
Name of Employer Skilled Healthcare LLC	Occupation President	n t Hospice	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) Scott C Robinson			Date of Receipt
Mailing Address 717 W. Balboa Blvo	d.		1 2 1 0 2 0 1 0
City Balboa	State CA	Zip Code 92661	Transaction ID: A2010-3377225
FEC ID number of contributing federal political committee.	C	92001	Amount of Each Receipt this Period 15.00
Name of Employer Skilled Healthcare LLC	Occupation	n t Hospice	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Scott C Robinson			Date of Receipt
Mailing Address 717 W. Balboa Blvo	d.		12 24 2010
City Balboa	State CA	Zip Code 92661	Transaction ID: A2010-3377354 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	92001	15.00
Name of Employer Skilled Healthcare LLC	Occupation Presiden	n t Hospice	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00	
SUBTOTAL of Receipts This Page (optiona			45.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politic	d Statements may not be sold or used by any personante name and address of any political committee to cal Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Linda Rosenstock Mailing Address 27442 Portola Parky City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For:	State Zip Code CA 92610 C Occupation Director Aggregate Year-to-Date ▼	Date of Receipt 1 2 2 4 2 0 1 0 Transaction ID: A2010-3312546 Amount of Each Receipt this Period 1000.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jon Sadayasu Mailing Address 27442 Portola Pkwy	1000.00	Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	State Zip Code CA 92610 C Occupation VP Finance Controller Aggregate Year-to-Date 480.00	Transaction ID: A2010-3377140 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Jon Sadayasu Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	State Zip Code CA 92610 C Occupation VP Finance Controller Aggregate Year-to-Date 500.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	1040.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16	
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politi	nd Statements may not be sold or used by any persithe name and address of any political committee to	son for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial)		Date of Descint	
Jon Sadayasu Mailing Address 27442 Portola Pkw	y #200	Date of Receipt 1 2 3 1 2 2 0 1 0	
City Foothill Ranch	State Zip Code CA 92610	Transaction ID: A2010-3377397 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	20.00	
Name of Employer Skilled Healthcare LLC	Occupation VP Finance Controller		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		
Full Name (Last, First, Middle Initial) Aisha Salaam	I	Date of Receipt	
Mailing Address 27442 Portola Pkw	Mailing Address 27442 Portola Pkwy #200		
City	State Zip Code	Transaction ID: A2010-3377134	
Foothill Ranch	CA 92610	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer Skilled Healthcare LLC	Occupation SVP Professional Services		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		
Full Name (Last, First, Middle Initial) Aisha Salaam		Date of Receipt	
Mailing Address 27442 Portola Pkwy	12 17 2010		
City	State Zip Code	Transaction ID: A2010-3377479	
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 50.00	
Name of Employer Skilled Healthcare LLC	Occupation SVP Professional Services		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1250.00		
SUBTOTAL of Receipts This Page (optional	J	120.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 34 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Poli	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Aisha Salaam Mailing Address 27442 Portola Pkw	vy #200		Date of Receipt
City Foothill Ranch FEC ID number of contributing	State CA	Zip Code 92610	Transaction ID: A2010-3377391 Amount of Each Receipt this Period 50.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary Other (specify)	Occupation SVP Prof	ressional Services Year-to-Date 1300.00]
Full Name (Last, First, Middle Initial) William Scott Mailing Address 12612 Promontory	r Road		Date of Receipt 1 2 0 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
City Los Angeles FEC ID number of contributing	State CA	Zip Code 90049	Transaction ID: A2010-3362913 Amount of Each Receipt this Period
federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate	n Year-to-Date ▼ 5000.00	5000.00
Full Name (Last, First, Middle Initial) Carl Sebern Mailing Address 27442 Portola Pkwy #200			Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State CA	Zip Code 92610	Transaction ID: A2010-3282713 Amount of Each Receipt this Period 15.00
Name of Employer Skilled Healthcare LLC		perations Support	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00]
SUBTOTAL of Receipts This Page (option	al)		5065.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (check drily drie)
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Pol	ng the name and address of any political cor	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Carl Sebern Mailing Address 27442 Portola Pk	wy #200	Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-3377230 Amount of Each Receipt this Period 15.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	Occupation Sr VP Operations Support Aggregate Year-to-Date ▼	0.00
Full Name (Last, First, Middle Initial) Carl Sebern Mailing Address 27442 Portola Pk	wy #200	Date of Receipt 1 2 2 4 2 0 1 0
City	State Zip Code	Transaction ID: A2010-3377359
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 15.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General	Occupation Sr VP Operations Support Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael Stephens		Date of Receipt
Mailing Address 27442 Portola Pa	rkway	M M / D D / Y Y Y Y Y 1 1 2 1 6 2 0 1 0
City Foothill Ranch	State Zip Code CA 92610	Transaction ID: A2010-3303613
FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 1000.00
Name of Employer Skilled Healthcare LLC	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
SUBTOTAL of Receipts This Page (option	nal)	1030.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 34 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Poli	tical Action Com	mittee	
Full Name (Last, First, Middle Initial) Peter Stong			Date of Receipt
Mailing Address 27442 Portola Pkv	vy #200		12 03 2010
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-3377217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	92010	35.00
Name of Employer Skilled Healthcare LLC	Occupation VPO	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) Peter Stong			Date of Receipt
Mailing Address 27442 Portola Pkv	vy #200		1 2 1 7 2 0 1 0
City Foothill Ranch	State CA	Zip Code	Transaction ID: A2010-3377562
FEC ID number of contributing federal political committee.	C	92610	Amount of Each Receipt this Period 35.00
Name of Employer Skilled Healthcare LLC	Occupation VPO	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 560.00	
Full Name (Last, First, Middle Initial) Peter Stong			Date of Receipt
Mailing Address 27442 Portola Pkv	vy #200		1 2 3 1 2 0 1 0
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-3377472 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32010	35.00
Name of Employer Skilled Healthcare LLC	Occupation VPO	n	
Receipt For: Primary General Other (specify) ▼	- + +	Year-to-Date ▼ 595.00	
SUBTOTAL of Receipts This Page (option	nal)		105.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Polit	the name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mary Thurber Mailing Address 27442 Portola Pkw	y #200	Date of Receipt 1 1 2 6 2 0 1 0
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-3282705 Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date	480.00
Full Name (Last, First, Middle Initial) Mary Thurber Mailing Address 27442 Portola Pkw	y #200	Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Foothill Ranch FEC ID number of contributing	State Zip Code CA 92610	Transaction ID: A2010-3377222 Amount of Each Receipt this Period 20.00
Receipt For: Primary Other (specify)	Occupation Administrator Aggregate Year-to-Date	500.00
Full Name (Last, First, Middle Initial) Mary Thurber Mailing Address 27442 Portola Pkw	y #200	Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	1 2 2 4 2 0 1 0 Transaction ID: A2010-3377351 Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date	520.00
SUBTOTAL of Receipts This Page (options	l)	60.00

A.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 33/34 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political Action Committee Full Name (Last, First, Middle Initial) Susan Whittle Date of Receipt Mailing Address 27442 Portola Parkway Suite 200 12 24 2010 City Zip Code State Transaction ID: A2010-3312545 Foothill Ranch CA 92610 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Skilled Healthcare LLC Occupation Chief Compliance Officer Receipt For: Aggregate Year-to-Date Primary General 500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	500.00
TOTAL This Period (last page this line number only)	<u> </u>	14159.38

CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	(check onl	NUMBER: PAGE 34/34
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c X 29
ny Information copied from such Reports and State for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political Advanced in the state of the st	me and address of any politic		
Online Fleathleare Group Inc. Femiliar 78	ation committee		
Full Name (Last, First, Middle Initial) Friends of Susan King Mailing Address P.O. Box 2693			Transaction ID: B373440 Date of Disbursement
City Abilene	State Zip Code TX 79604		Amount of Each Disbursement this Perio
Purpose of Disbursement P-2012 State House 71 TX		011	500.00
Candidate Name Susan L King		Category/ Type	
Senate President	sement For: 2012 X Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Senatory Judith Zaffirini Campaign			Transaction ID: B373441 Date of Disbursement
Mailing Address 1407 Washington Street	et		1 1 M / D 3 D / Y Y Y O Y O Y
City Laredo	State Zip Code TX 78042	_	Amount of Each Disbursement this Perio
Purpose of Disbursement P-2012 State Senate 21 TX		011	1000.00
Candidate Name Judith Zaffirini		Category/ Type	
ÿ 🗎 I	sement For: 2012 X Primary General Other (specify)		
Full Name (Last, First, Middle Initial) John Kuempel Campaign			Transaction ID: B375112 Date of Disbursement
Mailing Address 523 E Donegan Suite 2	01		12 7 20 7 20 7 20 10
City Seguin	State Zip Code TX 78155		Amount of Each Disbursement this Perio
Purpose of Disbursement G-2010 State House 44 TX		011	500.00
Candidate Name John Kuempel		Category/ Type	
Office Sought: House Disbur Senate President	sement For: 2010 Primary X General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optiona)		2000.00
	,		